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Contact: Robin Winchell (202) 225-4031

WASHINGTON, DC- U.S. Rep. Charlie Melancon today supported legislation, which passed the House with a voice vote, that authorizes the design, construction and operation of a new major medical facility in New Orleans to replace the Veterans Affairs Medical Center destroyed by Hurricane Katrina. Language in H.R. 5815, the Department of Veterans Affairs Medical Facility Authorization Act of 2006, will allow Louisiana State University and Veterans Affairs to jointly build a shared-use facility in New Orleans. Two of LSU's public hospitals, Charity and University, remain closed due to the extensive damage caused by Hurricane Katrina. These hospitals, which were located in downtown New Orleans, served as vital healthcare safety nets and were the only Level 1 trauma centers in the area.

In May, Melancon testified before the House Committee on Veterans Affairs in favor of this joint venture. His testimony (also below) can be found on the committee's website: http://veterans.house.gov/hearings/schedule109/may06/5-11-06/witness.html

"Today Congress affirmed that we have an obligation to provide our veterans with access to the quality health care they have so dearly earned with their service," said Melancon.

"This historic partnership between LSU and Veterans Affairs will help rebuild the much-needed healthcare infrastructure in New Orleans that was shattered by Hurricane Katrina."

The relevant portions of HR 5815 are as follows:

HR 5815 - Department of Veterans Affairs Medical Facility Authorization Act of 2006

To authorize major medical facility projects and major medical facility leases for the Department of Veterans Affairs for fiscal years 2006 and 2007, and for other purposes.

SEC. 3. AUTHORIZATION OF DESIGN, CONSTRUCTION, AND OPERATION OF MAJOR MEDICAL FACILITY PROJECT, NEW ORLEANS, LOUISIANA.

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- (a) Agreement Authorized- The Secretary of Veterans Affairs may enter into an agreement with the Louisiana State University to design, construct, and operate a co-located, joint-use medical facility in or near New Orleans to replace the medical center facility for the Department of Veterans Affairs Medical Center, New Orleans, Louisiana, damaged by Hurricane Katrina in August 2005.
- (b) Cost Limitation- Advance planning and design for a co-located, joint-use medical facility in or near New Orleans under subsection (a) shall be carried out in an amount not to exceed \$100,000,000.

Rep. Melancon's testimony before the House Committee on Veterans Affairs on May 11, 2006:

"As everyone is well aware, after Katrina the gulf coast suffered many devastating losses."

The grief felt by the people of the gulf coast is incomprehensible. Hurricane Katrina was the worst natural disaster in this nation's history, followed by the devastation wrought by Hurricane Rita, and south Louisiana has experienced more hardship and more loss in a period of mere weeks than most communities, states, or regions face in a lifetime. This is evidenced by the fact that nearly nine months after Katrina hit, we are struggling day by day to rebuild and recover. This is a long term project for us - because what was lost in Katrina was not just structures, but history, memories, culture, communities, and, saddest of all, many lives. But the spirit to return and reclaim our place in this world is strong in the hearts of the people of South Louisiana, and though we are down, we are not out. Not by a long shot.

"During our time of need, Louisiana had many friends who helped us in innumerable ways,

both in the immediate aftermath of the storm and continuing today. I would like to take this opportunity to thank the VA for its efforts to evacuate all 241 patients, 272 employees, and 342 family members from the New Orleans VA Medical Center. Not only that, but by September 7, 2005, all Community Based Outpatient Clinics in the affected areas were operational, and five mobile clinics were sent to Louisiana. The VA's efforts in the aftermath of the storm on behalf of the veterans community were outstanding and will not be forgotten.

"However, in this period of rebuilding some are questioning whether the VA Medical Center in New Orleans should be rebuilt. As a result of the immense flooding in New Orleans after Hurricane Katrina, two LSU hospitals, Charity and University, which served as vital healthcare safety nets and were the only Level 1 trauma centers in the area, remain closed due to extensive and irreparable damage. The VA Medical Center in New Orleans, which is located a block away from Charity Hospital, suffered a similar fate.

"In other words, much of the healthcare infrastructure of south Louisiana is in ruins. With limited access to healthcare, the region's entire recovery is in jeopardy. That is why the recent proposal to build shared facilities for LSU and the VA holds so much hope. This merger could provide the beds and doctors that the general population needs if the city is to have a chance at recovering, as well as restore services to the thousands of area veterans who depend on the VA for care.

"The burden on our veterans since the destruction of the VA Medical Center in New Orleans has been enormous. Access to care for them has always been an issue, particularly for the veterans in my district who have to travel long distances for the services they need.

"The situation has only been made worse in the wake of Katrina. Every day, my office hears from veterans who no longer have a place to go for the care they have earned with their service. Many had to evacuate the area altogether and - with no operating VA facilities in New Orleans - may not ever return.

"It's a situation that's not limited to veterans. Right now, thousands of families displaced from the Gulf Coast are looking at the recovery progress and trying to decide whether or not to come home. Levees are being fortified in most areas, there are a growing number of jobs to be had, homeowners can now expect to see at least some payment for their lost houses, and some schools are starting to come online. A tremendous amount of effort has gone into making that simple list happen.

"But a family asking itself whether it can move back has to ask the question 'where do I go if I get sick?, \(\Pi\) 'What doctor can I see if I get hurt? \(\Pi\) The answers to those questions lie in a strong healthcare community. \(\Pi\) Of key importance is the need to rebuild not just bricks and mortar but the human capital that it takes to deliver quality medical care. \(\Pi\) The hospitals in the LSU system weren't just providers of care but were also teaching hospitals. \(\Pi\) Without them, there is a huge hole in the fabric of medical professionals that are the foundation of a strong health care community. \(\Pi\) The LSU/VA plan gives us the opportunity to regenerate that important component. \(\Pi\)

"This is a historic partnership for historic times. From an efficiency standpoint, it makes sense. From a fiscal standpoint, it makes sense. And from a moral standpoint - after everything these gulf coast veterans have endured with these storms - it makes sense. I urge the committee to support these efforts to rebuild the healthcare infrastructure on the gulf coast for our veterans and the rest of our citizens in these affected areas."

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